

BUTTE COUNTY DEPARTMENT OF PUBLIC HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
SEPTIC SYSTEM INSPECTION CERTIFICATE

P.O. BOX 5364
CHICO, CALIFORNIA 95927
TEL: (530) 891-2727

7 COUNTY CENTER DRIVE
OROVILLE, CALIFORNIA 95965
TEL: (530) 538-7281

The sewage Disposal System was inspected at Veronica

For 3 Bedroom Double AP# 27-36-148

SEPTIC TANK

Size 1000 Gallons

Material Concrete

LEACHING FIELD

Length 450 feet

Width 20 inches

No. of lines 5

Rock Under Pipe 6 inches

The above dimensions meet the minimum requirements of Butte County Code, Chapter 19.
Additional leaching area will be required if experience shows it to be necessary.

Remarks: Soil better than expected

Date: 8-7-02

Cheryl
ENVIRONMENTAL HEALTH SPECIALIST

**BUTTE COUNTY DEPARTMENT OF PUBLIC HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
SEWAGE DISPOSAL PERMIT**

411 MAIN STREET • P. O. BOX 5364
CHICO, CALIFORNIA 95927
TEL: (916) 891-2727
FAX: (916) 895-6512

7 COUNTY CENTER DRIVE
OROVILLE, CALIFORNIA 95965
TEL: (916) 538-7281
FAX: (916) 538-2140

Date Issued 7-23-02
EXPIRES ONE YEAR FROM DATE OF ISSUANCE

Permit Issued to Paul Sanborn
P.O. Box 2748
Gridville

To construct a sewage disposal system for: 3 Bedroom Dwelling
A.P. # 27-86-148
Located at: Gridville

SEWAGE DISPOSAL SYSTEM REQUIREMENTS

SEPTIC TANK
Liquid capacity: 1000 gallons
Material: concrete
Total length: 6000 feet
Trench width: 24 inches
Minimum No. of lines: 6
Rock under pipe 6 inches

LEACHING FIELD

Special conditions: 50' from any surface
Keep beach lips on contour of ground
Additional leaching field will be required if experience shows it to be necessary. No part of the system may be located within 50 feet of the center line of any County Road.

NOTE: Satisfactory inspection by the Health Department is required before backfilling or putting the system into use. Occupancy of a new building is not permitted until the system is approved.

Permit Fee \$ 965 ; Penalty Fee \$ _____ ; TOTAL FEE \$ 965

Additional Fee \$ _____
Receipt No. 356102

Issued By: [Signature]
ENVIRONMENTAL HEALTH SPECIALIST [Signature]
Date: July 23/02

**BUTTE COUNTY DEPARTMENT OF PUBLIC HEALTH
DIVISION OF ENVIRONMENTAL HEALTH**

7 County Center Drive
Oroville, CA 95965
TEL: (530) 538-7281
FAX: (530) 538-2140

411 Main Street
P.O. Box 5364
TEL: (530) 891-2727
FAX: (530) 895-6512

APPLICATION FOR PERMIT TO CONSTRUCT A SEWAGE DISPOSAL SYSTEM

Owner's Name Paul Stanton Assessor's Parcel No. 27-36-148
Applicant's Name _____ Phone No. 533-1912

Mailing Address PO Box 2748

1. Construction Site Veronica + Melody
(Street and number or direction and distance to nearest crossroad)

2. Lot Size _____ feet x _____ feet. 7.66 acres

3. APPLICATION FOR: New system for new building Auxiliary or secondary system
Repair of or addition to old system New system to replace existing facilities

4. Type of building to be served by proposed system:
Mobile Home (size _____) No. Bedrooms _____ Garbage disposal? _____
House No. Bedrooms 3 Garbage disposal? _____
Other (specify) _____

5. Water supply for premises: (Must be safe, potable water) Community Private well Other _____
Water supply for adjoining properties: Community Private well Other _____

6. WORKMEN'S COMPENSATION INSURANCE
I am aware of the provisions of Section 3700 of the California Labor Code. Which requires every employer to be insured against liability for Workmen's Compensation.
 I have placed on file with the County of Butte a certificate of Workmen's Compensation Insurance.
 I certify that in the performance of the work for which this permit is issued I shall not employ any person in any manner so as to become subject to the Workmen's Compensation Laws of California.

7. **SCALE PLOT PLAN TO BE FURNISHED**
Sketch to scale on reverse side hereof, or attach scale sketch of plot plan of the premises showing:
a. Property lines. e. Show direction and approximate amount of slope.
b. Location of all proposed and existing buildings, structures, driveways and parking areas. f. Source of water.
c. Location of large trees, rocks, or other obstacles. g. Water lines.
d. Location of any well, spring, creek or other body of water on the parcel and within 100 feet of property line. h. Set back lines and easements.
i. Proposed sewage disposal system and area for replacement.

I hereby state that the information above and on the reverse side hereof or attached hereto is correct and true to the best of my knowledge. I understand that the permit must be obtained before any construction is begun either on the building or on the sewage disposal system, and that a satisfactory inspection of the system is required before the new building or dwelling may be occupied or the system backfilled, or put into use. I also understand that a safe potable water must be supplied to the new building or dwelling before occupancy can take place.

Signed Paul Stanton Owner Authorized agent Licensed contractor

Date 7-22-02 (An original letter of authorization must accompany this application in order for an authorized agent to sign.)

FOR OFFICE USE ONLY

Legal parcel? _____ Zoning _____ Use permitted? _____
Access _____ Rcpt. No. 3541A0 Amount 465
Water plans cleared _____ Potable water _____
Comment _____





